Fill	in this information to ident	ify your case:			
Unit	ted States Bankruptcy Court	for the:			
MID	DLE DISTRICT OF PENNS	/LVANIA			
Cas	se number (if known)		Chapter you are filing un	nder:	
			☐ Chapter 7		
			☐ Chapter 11		
			☐ Chapter 12		
			Chapter 13	☐ Check if this an amended filing	
				amended ming	
would betwall of Be a more	e—and in joint cases, these ald be yes if either debtor on ween them. In joint cases, of the forms.	forms use you to ask for information wns a car. When information is neede ne of the spouses must report inform s possible. If two married people are	n from both debtors. For exed about the spouses separation as <i>Debtor 1</i> and the defining together, both are eq	may file a bankruptcy case together—ca ample, if a form asks, "Do you own a ca rately, the form uses <i>Debtor 1</i> and <i>Debto</i> other as <i>Debtor 2</i> . The same person mu ually responsible for supplying correct , write your name and case number (if k	ar," the answer or 2 to distinguish st be Debtor 1 in information. If
Pai	t 1: Identify Yourself				
		About Debtor 1:	Ab	oout Debtor 2 (Spouse Only in a Joint C	ase):
1.	Your full name				
	Write the name that is on	Keith	Ga	arin	
	your government-issued picture identification (for	First name	Fir	rst name	
	example, your driver's	A.	M.		
	license or passport).	Middle name	Mi	ddle name	
	Bring your picture	Delancey		elancey	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	La	st name and Suffix (Sr., Jr., II, III)	·

All other names you have used in the last 8 years

Include your married or maiden names.

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

xxx-xx-9415

xxx-xx-4235

Official Form 101

tor 2 Garin M. Delancey		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
Include trade names and doing business as names	Business name(s)	Business name(s)
	EINs	EINs
Where you live		If Debtor 2 lives at a different address:
	27 Sheaffers Valley Road Landisburg, PA 17040	
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing	Check one:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

	or 1 Keith A. Delancey or 2 Garin M. Delancey				Case number (if known)			
art	2: Tell the Court About							
•	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.						
	choosing to file under	☐ Chapt	ter 7					
		☐ Chapt	ter 11					
		☐ Chap	ter 12					
		■ Chap	ter 13					
3.	How you will pay the fee	abo ord a p	out how you may pay. ler. If your attorney is re-printed address.	. Typically, if you are paying the fee yo submitting your payment on your beha	k with the clerk's office in your local court for more detail ourself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check with a credit card or ch			
			eed to pay the fee in e Filing Fee in Installn	n installments. If you choose this option Inents (Official Form 103A).	on, sign and attach the Application for Individuals to Pay			
		☐ I re	equest that my fee be t is not required to, wa	e waived (You may request this option aive your fee, and may do so only if your are unable to pay the fee in	n only if you are filing for Chapter 7. By law, a judge may our income is less than 150% of the official poverty line th n installments). If you choose this option, you must fill ou cial Form 103B) and file it with your petition.			
) .	Have you filed for	■ No.						
	bankruptcy within the last 8 years?	☐ Yes.						
			District	When	Case number			
			District	When	Case number			
			District	When	Case number			
١٥.	Are any bankruptcy	■ No						
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.						
			Debtor		Relationship to you			
			District	When	Case number, if known			
			Debtor		Relationship to you			
			District	When	Case number, if known			
1.	Do you rent your residence?	■ No.	Go to line 12.					
	residence:	☐ Yes.	Has your landlord	d obtained an eviction judgment agains	st you and do you want to stay in your residence?			
			☐ No. Go to	line 12.				

Jebt	or 1 Keith A. Delancey or 2 Garin M. Delancey			Case number (if known)
Part	3: Report About Any Bu	sinesses \	You Own as a Sole Prop	prietor
	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.	
	business.	☐ Yes.	Name and location of	business
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of business, if a	
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City,	State & ZIP Code
	it to this petition.			e box to describe your business:
			☐ Health Care E	Business (as defined in 11 U.S.C. § 101(27A))
			☐ Single Asset F	Real Estate (as defined in 11 U.S.C. § 101(51B))
			☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
			☐ Commodity B	roker (as defined in 11 U.S.C. § 101(6))
			☐ None of the a	bove
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	If you indicate that you.	the court must know whether you are a small business debtor so that it can set appropriate are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of <i>small</i>	■ No.	l am not filing under (Chapter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Cha Code.	pter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am filing under Cha	pter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part	Report if You Own or	r Have Any	Hazardous Property o	r Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.		
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?		If immediate attention is needed, why is it needed	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the property?	
	3			Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	tor 1 Keith A. Delancey tor 2 Garin M. Delancey			Case number	(if known)
Par	6: Answer These Questi	ons for R	eporting Purposes		
	What kind of debts do you have?	16a.	Are your debts primarily	consumer debts? Consumer debts are definersonal, family, or household purpose."	ed in 11 U.S.C. § 101(8) as "incurred by an
	you navo.		☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.	Are your debts primarily money for a business or ir	/ business debts? Business debts are debts to nvestment or through the operation of the busin	hat you incurred to obtain ness or investment.
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	u owe that are not consumer debts or business	s debts
17	Are you filing under	- N-	I am not filing under Chap	oter 7. Go to line 18.	
	Chapter 7?	■ No.	-		
	Do you estimate that after any exempt property is excluded and administrative expenses	☐ Yes.	I am filing under Chapter are paid that funds will be	7. Do you estimate that after any exempt prope available to distribute to unsecured creditors?	erty is excluded and administrative expenses
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes		
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1 □ 200-9	199	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets to be worth?	\$100	\$50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilities to be?	\$100	\$50,000 001 - \$100,000 ,001 - \$500,000 ,001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Par	t 7: Sign Below				
For	you	I have e	xamined this petition, and I	declare under penalty of perjury that the inform	nation provided is true and correct.
	•			er 7, I am aware that I may proceed, if eligible, ne relief available under each chapter, and I che	
				lid not pay or agree to pay someone who is not d the notice required by 11 U.S.C. § 342(b).	an attorney to help me fill out this
		I reques	t relief in accordance with th	ne chapter of title 11, United States Code, spec	sified in this petition.
		bankrup and 357 Colic Keith A	tcy case can result in fines to 1. A. Delancey	ent, concealing property, or obtaining money of up to \$250,000, or imprisonment for up to 20 years. Garin M. Delance	ears, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Signatur	d on MM / DD / YYYY	Signature of Debtor Executed on MM	SILIA

Debtor 1 Keith A. Delancey Debtor 2 Garin M. Delance		Case	e number (if known)
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	under Chapter 7, 11, 12, or 13 of title 11, L for which/the person is eligible. I also cert and, in a case in which § 707(b)(4)(D) app schedules filed with the petition is incorrec Signature of Attorney for Debter Michael Johnston Printed name Johnston & Zagurskie, PC Firm name 117 Main Street PO Box O Mifflin, PA 17058 Number, Street, City, State & ZIP Code	Jnited States Code, and have exify that I have delivered to the d lies, certify that I have no knowlet. Date	izmlawbecky@nmax.net
	Contact phone 717-436-8044	Email address	jzmiawbecky@iiiilax.net

16823 Bar number & State

Fill in th	is information to	identify your c	ase:				
Debtor 1	Keith First Na	A. Delancey	Middle Name	Last Name			
Debtor 2		M. Delancey	Middle Name	Last Name	<u> </u>		
(Spouse if,	itates Bankruptcy		MIDDLE DISTRICT OF				
United S	dates bankruptcy	Sourcior trie.	WIIDDEE DISTRICT OF	TEMMOTEVAIMA			
Case nu (if known)	mber					Check amende	if this is an ed filing
Offici	al Form 10	6Sum					
				nd Certain Statistical In			2/15
informat	ion. Fill out all of	your schedules	s first; then complete	le are filing together, both are equal the information on this form. If you ack the box at the top of this page.			
Part 1:	Summarize You	ır Assets					
						Your as: Value of	sets what you own
1. Sc l	hedule A/B: Prop Copy line 55, Tota	erty (Official For al real estate, fro	m 106A/B) m Schedule A/B			\$	140,500.00
1b.	Copy line 62, Tota	al personal prop	erty, from Schedule A/B	3		\$	37,920.77
1c.	Copy line 63, Tota	I of all property	on Schedule A/B			\$	178,420.77
Part 2:	Summarize You	ır Liabilities					
						Your lia	
			ims Secured by Propen n A, Amount of claim, a	ty (Official Form 106D) t the bottom of the last page of Part 1 (of Schedule D	\$	224,462.43
			insecured Claims (Offici (priority unsecured clai	ial Form 106E/F) ms) from line 6e of <i>Schedule E/F</i>		\$	0.00
3b.	Copy the total cla	ims from Part 2	(nonpriority unsecured	claims) from line 6j of Schedule E/F		\$	43,438.65
				You	r total liabilities \$		267,901.08
				100	—		207,901.00
Part 3:	Summarize You	ır Income and E	Expenses				
4. Scl	nedule I: Your Inco	me (Official Forr	n 106I)				5 450 OF
Co	by your combined	monthly income	from line 12 of Schedul	le I	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	\$	5,152.65
	nedule J: Your Exp by your monthly ex					\$	4,642.61
Part 4:	Answer These	Questions for A	Administrative and Sta	tistical Records	<u> </u>		
6. Are	-		Chapters 7, 11, or 13	? Check this box and submit this form to	the court with your	ather seh	odulos
		itting to report o	in this part of the form.	Check this box and submit this form to	the court with your c	MIEL SCIE	edules.
7. W h	Yes at kind of debt de	you have?					
-				debts are those "incurred by an individual for statistical purposes. 28 U.S.C. §		ersonal, f	amily, or
	Your debts are the court with yo			ave nothing to report on this part of the	oform. Check this bo	ox and sub	omit this form to
Official F	Form 106Sum			pilities and Certain Statistical Inform	ation	pa	age 1 of 2

Best Case Bankruptcy

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Debtor 1	Keith A.	Delancey
Debtor 2	Garin M	Delancev

Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

6,527.20

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	29,875.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total . Add lines 9a through 9f.	\$	29,875.00

Fill in this info	rmation to identify	our case and thi	s filing	:		
Debtor 1	Keith A. Dela			Lost Namo	 -	
Debtor 2	First Name Garin M. Dela	Middle	Name	Last Name		
Spouse, if filing)	First Name	Middle	Name	Last Name	= · -	
Jnited States B	Bankruptcy Court for t	the: MIDDLE DIS	STRICT	OF PENNSYLVANIA	:=	
Case number					·	☐ Check if this is ar amended filing
	orm 106A/B					
Schedu	le A/B: Pr	operty_		only once. If an asset fits in more than one		12/15
	e Each Residence, Bu			Estate You Own or Have an Interest In ence, building, land, or similar property?		
Yes. Where	e is the property?					
1.1 27 Shea t	ffers Valley Rd		What	is the property? Check all that apply Single-family home	Do not deduct secured cl	aims or exemptions. Put
Street addres	ss, if available, or other desc	cription		Duplex or multi-unit building Condominium or cooperative	the amount of any secure Creditors Who Have Clai	
				Manufactured or mobile home	Current value of the	Current value of the
Landisb		17040-0000		Land	entire property? \$140,500.00	portion you own? \$140,500.0
City	State	ZIP Code		Investment property Timeshare Other	Describe the nature of y (such as fee simple, ter	your ownership interest nancy by the entireties, o
			W ho □	has an interest in the property? Check one Debtor 1 only	a life estate), if known. Fee simple	
Perry				Debtor 2 only		
County			☐ Othe	Debtor 1 and Debtor 2 only At least one of the debtors and another r information you wish to add about this ite	Check if this is cor (see instructions) m. such as local	nmunity property
				erty identification number:	, • • • • • • • • • • • • • • • • • •	
				وأورياه موافعيات والمراجع والمراجع والمراجع والمراجع والمراجع	I. I 0047	
			Valu	ue determined by market analysis	in June 2017	
Add the dipages you	ollar value of the po	ortion you own fo Part 1. Write that	r all of	your entries from Part 1, including any	/ entries for	\$140,500.00

Schedule A/B: Property

page 1

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lummer 3 006 mileage: 1 ation:	32,000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$8,113.00 Do not deduct secured class the amount of any secure	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$8,113.00
3 0006 mileage: 1 ation: GMC ierra Truck 001 mileage: 2	32,000	□ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$8,113.00 Do not deduct secured clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$8,113.00
3 0006 mileage: 1 ation: GMC ierra Truck 001 mileage: 2	32,000	□ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$8,113.00 Do not deduct secured clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$8,113.00
3 0006 mileage: 1 ation: GMC ierra Truck 001 mileage: 2	32,000	□ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$8,113.00 Do not deduct secured clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$8,113.00
3 0006 mileage: 1 ation: GMC ierra Truck 001 mileage: 2	32,000	□ Debtor 1 only □ Debtor 2 only ■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one	the amount of any secure Creditors Who Have Clair Current value of the entire property? \$8,113.00 Do not deduct secured clair	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$8,113.00
mileage: 1 ation: iMC ierra Truck 001 mileage: 2	32,000	□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one	Creditors Who Have Clair Current value of the entire property? \$8,113.00 Do not deduct secured clair	ms Secured by Property. Current value of the portion you own? \$8,113.00
mileage: 1 ation: iMC ierra Truck 001 mileage: 2	32,000	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this is community property (see instructions) Who has an interest in the property? Check one	\$8,113.00 Do not deduct secured cla	\$8,113.00
iMC ierra Truck 001 mileage: 2	32,000	☐ At least one of the debtors and another ☐ Check if this is community property (see instructions) Who has an interest in the property? Check one	\$8,113.00 Do not deduct secured cla	\$8,113.00
iMC ierra Truck 001 mileage: 2		Check if this is community property (see instructions) Who has an interest in the property? Check one	Do not deduct secured cla	
ierra Truck 001 mileage: 2		(see instructions) Who has an interest in the property? Check one	Do not deduct secured cla	
ierra Truck 001 mileage: 2		_		
001 mileage: 2		Debter 1 only		•
mileage: 2		— Debior Formy	Creditors Who Have Clair	
		Debtor 2 only	Current value of the	Current value of the
ation:	18,000	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		\square At least one of the debtors and another		
		Check if this is community property (see instructions)	\$2,226.00	\$2,226.00
oyota		Who has an interest in the property? Check one	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
Runner		☐ Debtor 1 only	Creditors Who Have Clair	ms Secured by Property.
997	96,000	☐ Debtor 2 only	Current value of the	Current value of the
mileage: 4 ation:	30,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
		☐ At least one of the debtors and another		
		☐ Check if this is community property (see instructions)	\$1,975.00	\$1,975.00
		d other recreational vehicles, other vehicles, and tercraft, fishing vessels, snowmobiles, motorcycle a		
				\$12,314.00
			!	Current value of the cortion you own? Do not deduct secured claims or exemptions.
or appliances, furnit		, china, kitchenware		Jamis of exemptions.
a	value of the portion	value of the portion you ow e attached for Part 2. Write our Personal and Household lto ive any legal or equitable in ds and furnishings or appliances, furniture, linens	value of the portion you own for all of your entries from Part 2, including ar e attached for Part 2. Write that number here	tve any legal or equitable interest in any of the following items? I I I I I I I I I I I I I

Schedule A/B: Property

page 2

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	ebtor 1 ebtor 2	Keith A. Delancey Garin M. Delancey	Case number (if known)	
		player-\$100; Bedroom sui Washer-\$100; Dryer-\$50; (Dishwasher-\$20; Riding m	ring room suit-\$100; TV-\$250; Blu ray t-\$200; 2 32" TVs-\$200; Table-\$50; Chest freezer-\$100; Small freezer-\$50; nower-\$300; Push mower-\$20; Wood n tools-\$100; Grill-\$100; Air	\$2,290.00
7.	■ No	ics s: Televisions and radios; audio, video, stereo, are including cell phones, cameras, media players Describe	nd digital equipment; computers, printers, scanners; music collect s, games	ions; electronic devices
8.	Example No	les of value s: Antiques and figurines; paintings, prints, or oth other collections, memorabilia, collectibles Describe	ner artwork; books, pictures, or other art objects; stamp, coin, or ba	seball card collections;
9.	Example No	ant for sports and hobbies s: Sports, photographic, exercise, and other hobbit musical instruments Describe	by equipment; bicycles, pool tables, golf clubs, skis; canoes and k	ayaks; carpentry tools;
10	□ No	des: Pistols, rifles, shotguns, ammunition, and rela	Roger-\$300; 44 Special Bond Arms-\$250;	\$1,200.00
11	□ No	; les: Everyday clothes, furs, leather coats, designe Describe	er wear, shoes, accessories	
		All clothing		\$400.00
12	□ No		nent rings, wedding rings, heirloom jewelry, watches, gems, gold, s	ilver
		Wedding rings		\$200.00
13	Example ■ No	m animals les: Dogs, cats, birds, horses Describe		
14	■ No	er personal and household items you did not Give specific information	already list, including any health aids you did not list	

Schedule A/B: Property

page 3

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Debtor 1 Debtor 2	Keith A. Delancey Garin M. Delancey		Case number (if known)	
15. Add for F	the dollar value of all of Part 3. Write that number	your entries from Part : here	3, including any entries for pages you have attached	\$4,090.00
Do you o	escribe Your Financial Asse wn or have any legal or		y of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	oples: Money you have in y			
			Cash	\$20.00
	sits of money oples: Checking, savings, c institutions. If you ha	or other financial accounts with	s; certificates of deposit; shares in credit unions, brokerage ho the same institution, list each.	ouses, and other similar
			Institution name:	
	17.1.	Savings	Members 1st Federal Credit Union	\$5.00
	17.2.	Roth IRA Savings	Members 1st Federal Credit Union	\$2.27
	17.3.	Checking	Members 1st Federal Credit Union	\$100.00
	17.4.	Vacation Savings	Members 1st Federal Credit Union	\$5.00
	17.5.	Free Checking	Members 1st Federal Credit Union	\$0.00
_Exam _l	, mutual funds, or public oles: Bond funds, investme	ely traded stocks ent accounts with brokera	ige firms, money market accounts	
■ No □ Yes		Institution or issuer name	e:	
19. Non-pu joint v ■ No	ublicly traded stock and renture	interests in incorporate	d and unincorporated businesses, including an interest i	n an LLC, partnership, and
	Give specific information Nar	about them	% of ownership:	
Negoti Non-ne ■ No	rable instruments include pegotiable instruments are Give specific information a	ersonal checks, cashiers those you cannot transfer	e and non-negotiable instruments checks, promissory notes, and money orders. to someone by signing or delivering them.	
21. Retiren <i>Examp</i> □ No	nent or pension account	s), thrift savings accounts, or other pension or profit-sharing pla	ans
Official Form	n 106A/B	Scl	hedule A/B: Property	page 4

Best Case Bankruptcy

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Keith A. Delancey Garin M. Delancey	Case number	(if known)
s. List each account separately. Type of account:	Institution name:	
401K	Giant Food Stores	\$10,541.50
rity deposits and prepayments share of all unused deposits you have made s inples: Agreements with landlords, prepaid ren	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunication:	s companies, or others
3	Institution name or individual:	
ities (A contract for a periodic payment of mo	ney to you, either for life or for a number of years)	
ss Issuer name and description.		
sts in an education IRA, in an account in a S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qualified state tu	iition program.
Institution name and description	on. Separately file the records of any interests.11 U.S.C.	§ 521(c):
s, equitable or future interests in property (s. Give specific information about them	other than anything listed in line 1), and rights or po	wers exercisable for your benefit
nts, copyrights, trademarks, trade secrets, a nples: Internet domain names, websites, proce	and other intellectual property eds from royalties and licensing agreements	
s. Give specific information about them		
ises, franchises, and other general intangib inples: Building permits, exclusive licenses, coc	les perative association holdings, liquor licenses, profession	nal licenses
. Give specific information about them		
r property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
efunds owed to you		
. Give specific information about them, including	ng whether you already filed the returns and the tax years	S
2016 IRS	6 refund 1040	\$8,343.00
y support ples: Past due or lump sum alimony, spousal: Give specific information	support, child support, maintenance, divorce settlement,	property settlement
amounts someone owes you	ents, disability benefits, sick pay, vacation pay, workers	compensation Social Socurity
	Type of account: 401K rity deposits and prepayments share of all unused deposits you have made shales: Agreements with landlords, prepaid rent land. ities (A contract for a periodic payment of more land. lssuer name and description. sts in an education IRA, in an account in a st. C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and descriptions, equitable or future interests in property (and its, copyrights, trademarks, trade secrets, and poles: Internet domain names, websites, procedures. Give specific information about them ses, franchises, and other general intangibaples: Building permits, exclusive licenses, cook. Give specific information about them r property owed to you? efunds owed to you Give specific information about them, including the poles: Past due or lump sum alimony, spousal structures. Give specific information	Institution name: 401K Giant Food Stores rity deposits and prepayments share of all unused deposits you have made so that you may continue service or use from a company notes: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunication listitution name or individual: lities (A contract for a periodic payment of money to you, either for life or for a number of years) lissuer name and description. Issuer name and description. Institution name or undividual: lists in an education IRA, in an account in a qualified ABLE program, or under a qualified state to C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests. 11 U.S.C. s, equitable or future interests in property (other than anything listed in line 1), and rights or portion. Give specific information about them Its, copyrights, trademarks, trade secrets, and other intellectual property pipes: Internet domain names, websites, proceeds from royalties and licensing agreements. Give specific information about them Its, copyrights, trademarks, trade secrets, and other intellectual property pipes: Internet domain names, websites, proceeds from royalties and licensing agreements. Give specific information about them It property owed to you? Institution name and description about them, including whether you already filed the returns and the tax years are property owed to you? 2016 IRS refund 1040 Institution name and property power and property pless internation about them, including whether you already filed the returns and the tax years are property owed to you?

Schedule A/B: Property

page 5

Debtor 1 Debtor 2	· · · · · · · · · · · · · · · · · · ·	Case number (if known)	
31. Inter Exa ■ No	rests in insurance policies mples: Health, disability, or life insurance; health savings account (HSA)	A); credit, homeowner's, or renter's insurance	
	es. Name the insurance company of each policy and list its value. Company name:	Beneficiary:	Surrender or refund value:
If yo	interest in property that is due you from someone who has died but are the beneficiary of a living trust, expect proceeds from a life insurate leone has died.	ance policy, or are currently entitled to receive	property because
■ No	o es. Give specific information		
33. Clai i <i>Exa</i> ■ No	ms against third parties, whether or not you have filed a lawsuit of mples: Accidents, employment disputes, insurance claims, or rights to	r made a demand for payment sue	
☐ Ye	es. Describe each claim		
34. Oth €	er contingent and unliquidated claims of every nature, including co	ounterclaims of the debtor and rights to set	off claims
☐ Ye	es. Describe each claim		
_ `	financial assets you did not already list		
■ No	es. Give specific information		
	d the dollar value of all of your entries from Part 4, including any 6 Part 4. Write that number here		\$19,016.77
Part 5:	Describe Any Business-Related Property You Own or Have an Interest In. L	ist any real estate in Part 1.	
	ou own or have any legal or equitable interest in any business-related propo Go to Part 6.	erty?	
_	Go to line 38.		
	Describe Any Farm- and Commercial Fishing-Related Property You Own or If you own or have an interest in farmland. list it in Part 1.	Have an Interest In.	
	you own or have any legal or equitable interest in any farm- or con	nmercial fishing-related property?	
	No. Go to Part 7. Yes. Go to line 47.		
Ц,	res. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did No	ot List Above	
53. Do y <i>Exa</i>	you have other property of any kind you did not already list? amples: Season tickets, country club membership		
■ Ye	es. Give specific information		
	Possible class-action suit against Wa	lmart	\$2,500.00
54 A			\$2.500.00
54. A 0	ld the dollar value of all of your entries from Part 7. Write that num	Del nere	\$2,500.00

Schedule A/B: Property

page 6

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Debto Debto	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Case number (if known)	
Part 8	List the Totals of Each Part of this Form			
55. F	Part 1: Total real estate, line 2			\$140,500.00
56. F	Part 2: Total vehicles, line 5	\$12,314.00		
57. F	Part 3: Total personal and household items, line 15	\$4,090.00		
58. F	Part 4: Total financial assets, line 36	\$19,016.77		
59. F	Part 5: Total business-related property, line 45	\$0.00		
60. F	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. F	Part 7: Total other property not listed, line 54	+ \$2,500.00		
62. 1	Fotal personal property. Add lines 56 through 61	\$37,920.77	Copy personal property total	\$37,920.77
63. T	Total of all property on Schedule A/B. Add line 55 + line 62		· <u></u>	\$178,420.77

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Schedule A/B: Property

page 7

F	III in this infor	mation to identify your case:				
D	ebtor 1	Keith A. Delancey				
ים	ebtor 2		Middle Name	l	Last Name	
	pouse if, filing)	Garin M. Delancey First Name	Middle Name	<u>l</u>	_ast Name	
U	nited States Ba	ankruptcy Court for the: MIDD	LE DISTRICT OF PEI	NNSY	LVANIA	
	ase number _					☐ Check if this is an amended filing
\cap	official Fo	orm 106C				
		e C: The Prope	rty You Cla	im	as Evomnt	***
_	Cileuui	e o. The Proper	ty Tou Cla	21111	as Exempt	4/16
he nee	property you l	isted on <i>Schedule A/B: Property</i> nd attach to this page as many co	(Official Form 106A/B) as yo	our source, list the property that you	or supplying correct information. Using a claim as exempt. If more space is a additional pages, write your name and
spe any fur exe	ecific dollar ar y applicable s nds—may be u emption to a p	mount as exempt. Alternatively tatutory limit. Some exemptior unlimited in dollar amount. How	r, you may claim the is—such as those fo vever, if you claim ar	full fa r heal n exer	ir market value of the property be th aids, rights to receive certain l nption of 100% of fair market valu	One way of doing so is to state a eing exempted up to the amount of benefits, and tax-exempt retirement ue under a law that limits the it, your exemption would be limited
		fy the Property You Claim as E	xemnt			
		f exemptions are you claiming		n if vo	our snouse is filing with you	
		aiming state and federal nonban			• •	
		aiming federal exemptions. 11 t		11 0.0	3.0. g 022(b)(0)	
2			_ , , , ,			
۷.		perty you list on Schedule A/B				
		ion of the property and line on that lists this property	Current value of the portion you own	Amount of the exemption you claim S		Specific laws that allow exemption
				Che	ck only one box for each exemption.	
		rs Valley Rd Landisburg,	\$140,500.00		\$0.00	11 U.S.C. § 522(d)(1)
	Value deter in June 201	Perry County rmined by market analysis I7 hedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
		ner H3 132,000 miles hedule A/B: 3.1	\$8,113.00		\$0.00	11 U.S.C. § 522(d)(5)
					100% of fair market value, up to any applicable statutory limit	
		Sierra Truck 218,000 miles	\$2,226.00		\$2,226.00	11 U.S.C. § 522(d)(2)
			-		100% of fair market value, up to any applicable statutory limit	
		a 4Runner 296,000 miles	\$1,975.00		\$1,975.00	11 U.S.C. § 522(d)(2)
	20 0 0	,000.070D. 010			100% of fair market value, up to	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

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Best Case Bankruptcy

any applicable statutory limit

Debtor 1 Keith A. Delancey Debtor 2 Garin M. Delancey			Case number (if known)	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Refrig-\$50; Stove-\$50; Living room suit-\$100; TV-\$250; Blu ray	\$2,290.00		\$2,290.00	11 U.S.C. § 522(d)(3)
player-\$100; Bedroom suit-\$200; 2 32" TVs-\$200; Table-\$50; Washer-\$100; Dryer-\$50; Chest freezer-\$100; Small freezer-\$50; Dishwasher-\$20; Riding mower-\$300; Push mower-\$20; Wood splitter-\$400; Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
9mm Taurus-\$250; 9mm Roger-\$300; 44 Special Bond Arms-\$250; 30-06	\$1,200.00		\$1,200.00	11 U.S.C. § 522(d)(5)
Remington Rifle-\$300; 12 ga. Mossberg-\$100 Line from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
All clothing Line from Schedule A/B: 11.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(3)
Line from Schedule Add. 11.1			100% of fair market value, up to any applicable statutory limit	
Wedding rings Line from Schedule A/B: 12.1	\$200.00		\$200.00	11 U.S.C. § 522(d)(4)
Elife Hotil Gollodale 772. 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	11 U.S.C. § 522(d)(5)
Line from occioade 742. 10.1			100% of fair market value, up to any applicable statutory limit	
Savings: Members 1st Federal Credit Union	\$5.00		\$7.27	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Roth IRA Savings: Members 1st Federal Credit Union	\$2.27		\$2.27	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
Checking: Members 1st Federal Credit Union	\$100.00	•	\$100.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Vacation Savings: Members 1st Federal Credit Union	\$5.00		\$5.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.4			100% of fair market value, up to any applicable statutory limit	
Free Checking: Members 1st Federal Credit Union	\$0.00		\$0.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B: 17.5			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 2 of 3

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Debtor 1 Debtor 2	Keith A. Delancey Garin M. Delancey	Case number (if known)				
Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own		Specific laws that allow exemption		
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
	K: Giant Food Stores	\$10,541.50		\$10,541.50	11 U.S.C. § 522(d)(10)(E)	
Line	from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit		
	0: 2016 IRS refund	\$8,343.00		\$8,343.00	11 U.S.C. § 522(d)(5)	
Line	Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit		
	ssible class-action suit against	\$2,500.00		\$2,500.00	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B: 53.1				100% of fair market value, up to any applicable statutory limit		
	you claiming a homestead exemption pject to adjustment on 4/01/19 and every			led on or after the date of adjustmen	nt.)	
	Yes. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?	
	□ No					
	☐ Yes					

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 3 of 3

Fill in this informa	ation to identify yo	ur casa.				
Debtor 1	Keith A. Deland					
500.0. 1	First Name	T	st Name		-	
Debtor 2 (Spouse if, filling)	Garin M. Deland		st Name			
United States Bank	kruptcy Court for the	: MIDDLE DISTRICT OF PENNSYLV	VANIA			
Case number				-		
(if known)				<u>-</u>	_	if this is an ded filing
Official Form	106D					
		Who Have Claims Se	cured	by Propert	У	12/15
Be as complete and a s needed, copy the Anumber (if known).	accurate as possible. Additional Page, fill it	If two married people are filing together, b out, number the entries, and attach it to th	oth are equa is form. On t	ally responsible for su the top of any additio	upplying correct informa nal pages, write your na	tion. If more space me and case
1. Do any creditors h	ave claims secured b	y your property?				
☐ No. Check t	his box and submit t	his form to the court with your other sch	edules. You	have nothing else t	to report on this form.	
	all of the information			-		
Part 1: List All	Secured Claims					
for each claim. If mor	re than one creditor has	more than one secured claim, list the creditor is a particular claim, list the other creditors in P cal order according to the creditor's name.	separately 'art 2. As	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	it Acceptance	Describe the property that secures the cl	laim:	\$10,618.94	\$8,113.00	\$2,505.94
Creditor's Name		2006 Hummer H3 132,000 miles				,
PO Box 189 Spartanbur	99 g, SC 29302	As of the date you file, the claim is: Check apply. Contingent	all that			
Number, Street, C	ity, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt	? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortg	age or secur	ed		
Debtor 2 only		car loan)	-1- PX			
■ Debtor 1 and Debt □ At least one of the		Statutory lien (such as tax lien, mechanic	o's lien)			
Check if this clair community debt	m relates to a	☐ Judgment lien from a lawsuit ☐ Other (including a right to offset)		··································		
Date debt was incurr		Last 4 digits of account number	1001			
<u> </u>						
Landisburg Authority	Municipal	Describe the property that secures the cla	aim:	\$934.92	\$140,500.00	\$934.92
Creditor's Name		27 Sheaffers Valley Rd Landisbu PA 17040 Perry County Value determined by market analysis in June 2017	ırg,		la	
PO Box 53		As of the date you file, the claim is: Check apply.	all that			
Landisburg,	, PA 17040	Contingent				
Number, Street, Cit	ty, State & Zip Code	☐ Unliquidated				
Who owes the debt	? Check one.	Disputed Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as mortga	age or secure	ed		
Debtor 2 only		car loan)				
Debtor 1 and Debto	•	Statutory lien (such as tax lien, mechanic	:'s lien)			
☐ At least one of the orange ☐ Check if this claim ☐ Check if this claim ☐ The chain is th	debtors and another	Judgment lien from a lawsuit				
community debt	rrelates to a	Other (including a right to offset)				

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 3

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Debtor 1 Keith A. Delancey	Ca	ise number (if know)		
First Name Middle I	lame Last Name			
Debtor 2 Garin M. Delancey				
First Name Middle N	lame Last Name			
Date debt was incurred 4/19/2016	Last 4 digits of account number			
2.3 Landisburg Municipal	Describe the property that secures the claim:	\$1,539.16	\$140,500.00	\$1,539.16
Authority Creditor's Name	27 Sheaffers Valley Rd Landisburg,			, ,
	PA 17040 Perry County			
	Value determined by market			
	analysis in June 2017			
DO B - v E2	As of the date you file, the claim is: Check all that			
PO Box 53 Landisburg, PA 17040	apply.			
	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
Miles and March 1940 Of the Inches	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secure	ed		
☐ Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred 4/21/2017	Last 4 digits of account number			
Date debt was incurred 4/21/2017	Last 4 digits of account number			
2.4 Members 1st Federal		\$12.412.00	\$140 500 00	¢12.412.00
Credit Union	Describe the property that secures the claim:	\$12,412.00	\$140,500.00	\$12,412.00
Creditor's Name	27 Sheaffers Valley Rd Landisburg,			
	PA 17040 Perry County			
5000 Louise Drive	Value determined by market			
PO Box 40	analysis in June 2017 As of the date you file, the claim is: Check all that			
Mechanicsburg, PA	apply.			
17055	☐ Contingent			
Number, Street, City. State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secure	ed		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt	— Other (including a right to offset)			
Date debt was incurred 2007	Last 4 digits of account number			
2.5 Seterus, Inc	Describe the property that secures the claim:	\$198,957.41	\$140,500.00	\$58,457.41
Creditor's Name	27 Sheaffers Valley Rd Landisburg,			
	PA 17040 Perry County			
	Value determined by market			
Attn Bankruptcy Dept	analysis in June 2017			
PO Box 1047	As of the date you file, the claim is: Check all that			
Hartford, CT 06143-1047	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, Oity, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
_	_			
Debtor 1 only	An agreement you made (such as mortgage or secure	ed		
Debtor 2 only	car loan)			
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
Official Form 106D Additiona	Dago of Cohodulo D. Craditara Mila Have Oleter	a Canusad hii Duii - 4		2 63
Additions	al Page of Schedule D: Creditors Who Have Claims	s secured by Propert	у	page 2 of 3

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Debtor 1	Keith A. De	lancev		Cas	e number (if know)
	First Name	Middle Name	Last Name		
Debtor 2	Garin M. De	elancev			
	First Name	Middle Name	Last Name		
□ At leas	st one of the debte	ors and another	Judgment lien from a lawsuit		
☐ Checl	k if this claim relationships the control of the co		Other (including a right to offset)		
Date deb	t was incurred	2006	Last 4 digits of account number	3121	
					¢224.462.42
Add the	e dollar value of	your entries in Colum	n A on this page. Write that number	nere:	\$224,462.43
If this i	s the last page o hat number here	f your form, add the d	Ioliar value totals from all pages.		\$224,462.43
write ti	nat number nere	•			
Part 2:	List Others to	Be Notified for a D	Debt That You Already Listed		
trying to than one	collect from you creditor for any	for a dobt you owe to	o someone else, list the creditor in Pa listed in Part 1, list the additional cre	art 1. and then	ady listed in Part 1. For example, if a collection agency is list the collection agency here. Similarly, if you have more you do not have additional persons to be notified for any
	ame Number Str	eet, City, State & Zip C	ode	On which lin	ne in Part 1 did you enter the creditor? 2.5
		nal Mortgage Ass		On which in	e iii att i did yed enter the ereane.
	900 Wiscons			Last 4 digits	of account number
•		OC 20016-2892			
					. 0.5
IN.		eet, City, State & Zip C	code	On which lir	ne in Part 1 did you enter the creditor? 2.5
		Rosenstiel PC		1 4	-fnt number
		Rosensteil Esq		Last 4 digits	s of account number
-	49 South Ave				
С	lifton Height	s, PA 19018			

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 3 of 3

Fill in thi	is information to identify your case:		
Debtor 1	Keith A. Delancey		
		dle Name Last Name	-
Debtor 2 (Spouse if, f	Garin M. Delancey First Name Mid	idle Name Last Name	
United S	tates Bankruptcy Court for the: MIDDL	E DISTRICT OF PENNSYLVANIA	-
Case nur	mber	-	Check if this is an amended filing
O (6)	1005/5		
	Form 106E/F	Use a sumed Claims	12/15
	lule E/F: Creditors Who Ha		or creditors with NONPRIORITY claims. List the other party to
Schedule Schedule left. Attack	G: Executory Contracts and Unexpired Lease D: Creditors Who Have Claims Secured by Properties of the Continuation Page to this page. If you have case number (if known).	es (Official Form 106G). Do not include any croperty. If more space is needed, copy the Parlave no information to report in a Part, do not	ts on Schedule A/B: Property (Official Form 106A/B) and on editors with partially secured claims that are listed in t you need, fill it out, number the entries in the boxes on the file that Part. On the top of any additional pages, write your
Part 1:	List All of Your PRIORITY Unsecured		
_	ny creditors have priority unsecured claims a	igainst you?	
	o. Go to Part 2.		
☐ Ye			
	List All of Your NONPRIORITY Unsec		
3. Doar	ny creditors have nonpriority unsecured clair	ns against you?	
□ N ₁	 You have nothing to report in this part. Submit 	t this form to the court with your other schedules.	
■ Ye	9 5.		
unsec	cured claim, list the creditor separately for each one creditor holds a particular claim, list the other	claim. For each claim listed, identify what type of	each claim. If a creditor has more than one nonpriority claim it is. Do not list claims already included in Part 1. If more nonpriority unsecured claims fill out the Continuation Page of
raitz	. .		Total claim
	Build Card Nonpriority Creditor's Name	Last 4 digits of account number 948	2 \$525.56
	PO Box 9203	When was the debt incurred? 201	7
-1	Old Bethpage, NY 11804 Number Street City State Zlp Code	As of the date you file, the claim is: Che	ck all that apply
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
!	Debtor 2 only	Unliquidated	
1	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim	ı:
(☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation.	agreement or divorce that you did not
	s the claim subject to offset?	report as priority claims	and other similar debte
	No	Debts to pension or profit-sharing plans	
	Yes	Other. Specify Credit card pure	hases

Schedule E/F: Creditors Who Have Unsecured Claims

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52347

Debtor 2 Debtor 2	-	Case number (if know)	
4.2	Carlisle HMA Physician Management	Last 4 digits of account number	\$58.50
	Nonpriority Creditor's Name Attn #11383W PO Box 14000 Belfast, ME 04915-4033	When was the debt incurred? 8/22/2016	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical bill	
4.3	Credit One Bank	Last 4 digits of account number	\$598.00
	Nonpriority Creditor's Name c/o Midland Credit Managment 2365 Northside Dr Ste 300	When was the debt incurred? 2014	
	San Diego, CA 92018 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
4.4	CreditOne Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$272.00
	PO Box 98872 Las Vegas, NV 89193	When was the debt incurred? 2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Credit card purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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Sept Ed/Naviet Normority Creditor's Name PO Box 9675, Name	Debtor Debtor	1 Keith A. Delancey 2 Garin M. Delancey	Case number (if know)	· · · · · · · · · · · · · · · · · · ·						
Wilkes Barre, PA 18773 Number Street City State 2D Code Who incurred the debty? Check ane. Debtor 1 and Debtor 2 only Disputed	4.5		Last 4 digits of account number	\$29,875.00						
Number Street City State Zip Code Who incurred the debt? Check one Debtor 1 only		PO Box 9635	When was the debt incurred? 2012-2013							
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another close with the claim subject to offset? Sourced the debt of source of the debtors and another close of the debtors and another close of the debtors of the debtors of the debtors and another close of the debtors of the debtors and another close of the debtors and another close of the debtors of the debtors and another close of the debtors of the debtors and another close of the debtor and potent of the debtor ano		Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply							
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At least one of the debtors and another Student loans St		■ Debtor 2 only	☐ Unliquidated							
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Singerhut Direct										
As Fingerhut Direct		■ No	\square Debts to pension or profit-sharing plans, and other similar debts							
Nonpriority Creditor's Name C/O Jefferson Capital Systems PO Box 7999 Saint Cloud, MN 56302-7999 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only		☐ Yes	Other. Specify							
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Debtor 1 and Debtor 2 only		Debtor 2 only	☐ Unliquidated							
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Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection First Premier Bank Nonpriority Creditor's Name PO Box 5524 Sioux Falls, SD 57117-5524 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Street City State Cip Check one. Debts to pension or profit-sharing plans, and other similar debts Feport as priority claims report as priority claims Roll Other. Specify Collection \$476.00 \$476.00 \$476.00 \$476.00 \$476.00			☐ Student loans							
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Yes		•								
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When was the debt incurred? 2014 Sioux Falls, SD 57117-5524 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Debtor 1 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 and Debtor 4 only Debtor 1 and Debtor 5 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 6 only Debtor 1 and Debtor 7 only Debtor 1 and Debtor 8 only Debtor 1 and Debtor 9 only Debtor 1 and	4.7		Last 4 digits of account number	\$476.00						
Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts			When was the debt incurred? 2014							
Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts			As of the date you file, the claim is: Check all that apply							
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		· · · · · · · · · · · · · · · · · · ·	As of the date you me, the claim is. Oneok an that apply							
□ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_	Contingent							
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ sthe claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts		■ Debtor 2 only								
□ At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		•								
□ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts		_ ′	·							
debt Is the claim subject to offset? In No Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts			☐ Student loans							
■ No □ Debts to pension or profit-sharing plans, and other similar debts		debt	· · · · · · · · · · · · · · · · · · ·							
		_	<u></u> -							
☐ Yes ☐ Other. Specify Credit card purchases			· · · · · · · · · · · · · · · · · · ·							
		∐ Yes	■ Other Specify Credit card purchases							

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor Debtor	1 Keith A. Delancey 2 Garin M. Delancey	Case number (if know)							
4.8	First Premier Bank	Last 4 digits of account number	\$450.00						
	Nonpriority Creditor's Name PO Box 5524 Sioux Falls, SD 57117-5524	When was the debt incurred? 2015							
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	☐ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims							
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts							
	Yes	Other Specify Credit card purchases							
4.9	First SVG CC	Last 4 digits of account number	\$422.00						
	Nonpriority Creditor's Name 500 East 60th St North Sioux Falls, SD 57104	When was the debt incurred? 2012							
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
	Debtor 1 only	☐ Contingent ☐ Unliquidated ☐ Disputed							
	Debtor 2 only								
	☐ Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	☐ Check if this claim is for a community								
	debt Is the claim subject to offset?								
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts							
	Yes	Other Specify Credit card purchases							
4.1	GE Capital Retail Bank	Last 4 digits of account number 8001	\$387.97						
	Nonpriority Creditor's Name c/o Midland Funding 2365 Northside Dr Ste 300	When was the debt incurred? 2014							
	San Diego, CA 92108 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply							
	Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated ☐ Disputed							
	☐ Debtor 1 and Debtor 2 only								
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:							
	☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims							
	debt Is the claim subject to offset?								
	No	☐ Debts to pension or profit-sharing plans, and other similar debts							
	☐ Yes	Collection (Acct#6018596410665453 Old ■ Other Specify Navy)							

Schedule E/F: Creditors Who Have Unsecured Claims

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Best Case Bankruptcy

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GE Capital Retail Bank	Last 4 digits of account number 3488	\$750.7
Nonpriority Creditor's Name c/o Midland Funding 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred? 2014	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other Specify Collection (Acct #8241/Amazon)	
HSBC Bank	Last 4 digits of account number	\$789.
Nonpriority Creditor's Name c/o Portfolio Recovery PO Box 41067	When was the debt incurred? 2016	
Norfolk, VA 23541-1067 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
☐ Debtor 1 only	☐ Contingent	
■ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other Specify Collection	_
Merrick Bank	Last 4 digits of account number	\$1.191.6
Nonpriority Creditor's Name		<u>-</u>
PO Box 9201	When was the debt incurred? 2012	
Old Bethpage, NY 11804 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only		
	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
Is the claim subject to offset? ■ No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	

Schedule E/F: Creditors Who Have Unsecured Claims

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	1 Keith A. Delancey 2 Garin M. Delancey	Case number (if know)
4.1	Midland Funding LLC	Last 4 digits of account number \$864.25
	Nonpriority Creditor's Name 8875 Aero Drive San Diego, CA 92168	When was the debt incurred? 3/21/2016
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply
	Debtor 1 only	☐ Contingent
	■ Debtor 2 only	☐ Unliquidated
	☐ Debtor 1 and Debtor 2 only	☐ Disputed
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
	☐ Check if this claim is for a community	☐ Student loans
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts
	Yes	Other Specify Civil Judgment No. CV-JP-2016-253
4.1	National Recovery Nonpriority Creditor's Name	Last 4 digits of account number \$77.00
	2491 Paxton Street Harrisburg, PA 17111-1036	When was the debt incurred? 2017
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply
	Who incurred the debt? Check one.	
	Debtor 1 only	☐ Contingent
	Debtor 2 only	☐ Unliquidated
	☐ Debtor 1 and Debtor 2 only	☐ Disputed
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
	☐ Check if this claim is for a community	☐ Student loans
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not
	Is the claim subject to offset?	report as priority claims
	No	Debts to pension or profit-sharing plans, and other similar debts
	☐ Yes	Other. Specify Medical collection
4.1	Office of UC Benefits	Last 4 digits of account number 4235 \$1,176.00
	Nonpriority Creditor's Name UI Payment Services PO Box 57503	When was the debt incurred? 2016
	Harrisburg, PA 17106-7503 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply
	Who incurred the debt? Check one.	
	☐ Debtor 1 only	☐ Contingent
	Debtor 2 only	☐ Unliquidated
	Debtor 1 and Debtor 2 only	☐ Disputed
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:
	Check if this claim is for a community	☐ Student loans
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	No	☐ Debts to pension or profit-sharing plans, and other similar debts
	□Yes	Other. Specify Overpayment of benefits
	100	Other, Specify Over payment of benefits

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor Debtor	• • • • • • • • • • • • • • • • • • •		Case number (if know)	
4.1	PPL Electric Utilities	Last 4 digits of account number	8023	\$1,568.44
	Nonpriority Creditor's Name 2 North 9th Street Allentown, PA 18101-1175	When was the debt incurred?	2016-2017	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not	
	■ _{No}	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other Specify Utility		
			· · · · · · · · · · · · · · · · · · ·	
4.1 8	Professional Account Services Inc Nonpriority Creditor's Name	Last 4 digits of account number	2613	\$37.49
	Attn PCU PO Box 68	When was the debt incurred?	2016	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other Specify Medical bil	I/Carlisle Medical Group	
4 1				
9	Sprint Nonpriority Creditor's Name	Last 4 digits of account number		\$438.00
	c/o Convergent PO Box 9004	When was the debt incurred?	2016	
	Renton, WA 98057 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharir	ng plans, and other similar debts	
	■ No			
	☐ Yes	Other. Specify Collection		

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 2	1 Keith A. Delancey 2 Garin M. Delancey	Case number (if know)	
4.2 0	Swiss Colony	Last 4 digits of account number	\$342.00
	Nonpriority Creditor's Name 1112 7th Ave	When was the debt incurred? 2003	
-	Monroe, WI 53566-1364 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.2	Synchrony Bank	Last 4 digits of account number	\$434.00
<u>·</u>	Nonpriority Creditor's Name c/o PortFolio Recovery PO Box 41067	When was the debt incurred? 2015	
	Norfolk, VA 23541-1067 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	■ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Collection	
4.2	Synchrony Bank	Last 4 digits of account number	\$336.00
	Nonpriority Creditor's Name		
	c/o PortFolio Recovery PO Box 41067 Norfolk, VA 23541-1067	When was the debt incurred? 2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit card purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 2	Keith A. Delancey Garin M. Delancey	Case number (if know)	
ა	Total Visa Nonpriority Creditor's Name	Last 4 digits of account number 8644	\$318.58
	PO Box 91510 Sioux Falls, SD 57109-1510	When was the debt incurred? 2016	
-	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Credit card purchases	
•	Walmart/Synchrony Bank Nonpriority Creditor's Name	Last 4 digits of account number	\$248.00
	PO Box 965060 Orlando, FL 32896-5060	When was the debt incurred? 2012	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit card purchases	
4.2	Walmart/Synchrony Bank	Last 4 digits of account number	\$177.00
	PO Box 965060 Orlando, FL 32896-5060	When was the debt incurred? 2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify Credit card purchases	

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Debtor 2			elancey elancey		Case n	umber (if kno	ow)		. <u></u>
4.2	Webbank			Last 4 digits of account number	7832				\$347.11
	Nonpriority C	Credit		-					
	2365 Nort	thsi	Credit Management Inc de Dr Ste 300	When was the debt incurred?	2014				
_		et Ci	ty State ZIp Code	As of the date you file, the claim	is: Check	all that apply	,		
	_		e debt? Check one.	_					
	Debtor 1	,		Contingent					
	Debtor 2	-		Unliquidated					
	Debtor 1	and (Debtor 2 only	Disputed	a				
			the debtors and another	Type of NONPRIORITY unsecure Student loans	u ciaiii.				
	debt		claim is for a community	☐ Obligations arising out of a sepa	aration ag	reement or di	vorce that you di	d not	
		subj	ect to offset?	report as priority claims		1 - 41			
	No			Debts to pension or profit-sharing	•				
	☐ Yes			■ Other Specify Collection	(Acct #	63699210	31418766)	-	
4.2		_							
7	World Fir Nonpriority C		or's Name	Last 4 digits of account number		–			\$43.00
		olio	Recovery	When was the debt incurred?	2015			-	
			23541-1067_ ty State Zlp Code	As of the date you file, the claim	is: Check	all that apply	,		
	Who incurre	ed th	e debt? Check one.						
	Debtor 1	only		☐ Contingent					
	Debtor 2	only		☐ Unliquidated					
	Debtor 1	and l	Debtor 2 only	☐ Disputed					
	☐ At least o	ne of	f the debtors and another	Type of NONPRIORITY unsecure	d claim:				
		this	claim is for a community	☐ Student loans					
	debt Is the claim	subj	ect to offset?	☐ Obligations arising out of a separeport as priority claims				d not	
	■ No			Debts to pension or profit-sharing	ng plans, a	and other sim	ilar debts		
	☐ Yes			■ Other Specify Collection					
Part 3:	List Oth	ers	to Be Notified About a Debt	That You Already Listed					
is tryir have n	ng to collect nore than or	from e cre	you for a debt you owe to some	ut your bankruptcy, for a debt that yone else, list the original creditor in bu listed in Parts 1 or 2, list the add ubmit this page.	n Parts 1	or 2, then lis	t the collection	agency here. Sim	nilarly, if you
Part 4:	Add the	Am	ounts for Each Type of Unse	cured Claim					
	he amounts f unsecured			. This information is for statistical r	reporting	purposes o	nly. 28 U.S.C. §1	59. Add the amou	unts for each
							Total Claim		
	otal	∂ a .	Domestic support obligations		6a.	\$		0.00	
cla from Pa	aims art 1	6b.	Taxes and certain other debts yo	ou owe the government	6b.	\$		0.00	
			Claims for death or personal inju	=	6c.	\$		0.00	
	6	∂d.	Other. Add all other priority unsecu	ured claims. Write that amount here.	6d.	\$		0.00	
	6	Se.	Total Priority. Add lines 6a throug	h 6d.	6 e .	\$		0.00	
							Total Claim		
	ϵ	3f.	Student loans		6f.	\$		75.00	
	otal iims								

Case 1:17-bk-03219-HWV Doc 1 Filed 08/03/17 Entered 08/03/17 16:49:25 Desc Main Document Page 32 of 48

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Best Case Bankruptcy

Schedule E/F: Creditors Who Have Unsecured Claims

Official Form 106 E/F

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Debtor 1 Debtor 2 Garin M. Delancey

from Part 2 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
6h. Debts to pension or profit-sharing plans, and other similar debts
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

6j. Total Nonpriority. Add lines 6f through 6i.

6c) Case number (if know)

6g. \$ 0.00

6h. \$ 0.00

6i. \$ 13,563.65

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 11 of 11

Fill in	this inform	nation to identify your	case:						
Debto	or 1	Keith A. Delancey	y Middle Name	e	Last Name		-		
Debto	or 2 le if, filling)	Garin M. Delance	Middle Nami	e	Last Name				
Unite	d States Ba	nkruptcy Court for the:	MIDDLE DIST	RICT OF PENNS	SYLVANIA				
Case (if know	number								Check if this is an amended filing
									J
Offi	cial Fo	rm 106G							
Sch	nedule	G: Executor							12/15
inforn additi	nation. If m onal pages	and accurate as possit ore space is needed, c s, write your name and e any executory contra	copy the addition case number (if	nal page, fill it o known).	ing together, ut, number th	both are equ ne entries, ar	ually responsibl nd attach it to th	e for s	upplying correct e. On the top of any
1	No. Chec	k this box and file this fond all of the information be	orm with the court	with your others					
e a	example, re and unexpire		bhone). See the i	nstructions for th	is form in the i	instruction bo	oklet for more ex	kamples	ct or lease is for (for soft executory contracts
	Person or	company with whom y Name, Number, Street, Cit		tract or lease	State wh	at the contra	act or lease is f	or	
2.1	Name								
	Number	Street							
	City		State	ZIP Code					
2.2	Name								
	Number	Street							
2.3	City	- 1	State	ZIP Code					
2.0	Name	_		-					
	Number	Street							
2.4	City	<u> </u>	State	ZIP Code	A				
2.4	Name								
	Number	Street							
2 5	City		State	ZIP Code					
2.5	Name								
	Number	- Street							

Official Form 106G

City

Schedule G: Executory Contracts and Unexpired Leases

ZIP Code

Page 1 of 1

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State

Fill in this	information to identify your o	ase:			
Debtor 1	Keith A. Delancey				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	Garin M. Delancey First Name	Middle Name	Last Name	- 	
United Sta	tes Bankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA		
Case numl (if known)	ber			☐ Check if this is an amended filing	
− Officia	l Form 106H				
	lule H: Your Code	ebtors		12/1	5
_	e and case number (if known) you have any codebtors? (if			a codebtor.	
■ No					
2. Wit Arizor	thin the last 8 years, have you na, California, Idaho, Louisiana,	ı lived in a community , Nevada, New Mexico, F	property state or territory? Puerto Rico, Texas, Washing	(Community property states and territories include iton, and Wisconsin.)	
■ No	o. Go to line 3.				
☐ Ye	s. Did your spouse, former spo	use, or legal equivalent l	ive with you at the time?		
in lin Form		filed marcan ic a auar	antor or cosinner Make Si	your spouse is filing with you. List the person shore you have listed the creditor on Schedule D (Off S). Use Schedule D, Schedule E/F, or Schedule G (
	Column 1: Your codebtor Name, Number, Street, City, State and Z	IIP Code		Column 2: The creditor to whom you owe the de Check all schedules that apply:	bt
3.1				☐ Schedule D, line	
₩	Name			☐ Schedule E/F, line ☐ Schedule G, line	
	Number Street				
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
	Number Street City	State	ZIP Code		

Official Form 106H Software Copyright (c) 1996-2017 Best Case, LLC - www.bestcase.com Schedule H: Your Codebtors

Page 1 of 1 Best Case Bankruptcy

Fill in t	this information to identify	vour cas	se:								
Debto		A. Dela					_				
Debtoi (Spouse	r 2 Garin	M. Dela	ncey								
United	l States Bankruptcy Court	for the:	MIDDLE DISTRICT OF	F PENNS	SYLVANIA		_				
	number								nt show	ing postpetition chapter following date:	
Offi	cial Form 106l							MM / DD/ Y	/YY		
Sch	nedule I: Your	Inco	ome							12/15	
Part 1	Fill in your employment	form. C	spouse is not filing Wi	onal pag	es, write your	name	and	case number (II k		Answer every question	
	nformation.	1-	■ Employed			■ Employed					
i	f you have more than one attach a separate page wi nformation about addition	th	Employment status		☐ Not employed			·	☐ Not employed		
6	employers.		Occupation	Clerk				CNA			
	nclude part-time, seasona self-employed work.	al, or	Employer's name	Giant	Food Stores	s, LLC	2	Oak HR	C Stor	nebridge LLC	
	Occupation may include sor homemaker, if it applies		Employer's address		ox 249 sle, PA 17013	3			102 Chandra Drive Duncannon, PA 17020		
			How long employed t	here?	since 200	0		S	ince 2	014	
Part 2	Give Details Ab	out Mon	thly Income								
Estim spous	ate monthly income as one unless you are separate	of the da	ate you file this form. If	you have	nothing to rep	ort for	any l	ine, write \$0 in the	space.	Include your non-filing	
If you more s	or your non-filing spouse space, attach a separate s	have mo	ore than one employer, co	ombine th	ne information f	or all	emplo	oyers for that perso	n on the	e lines below. If you need	
								For Debtor 1		Debtor 2 or filing spouse	
2.	List monthly gross wag deductions). If not paid m	es, sala nonthly, d	ry, and commissions (becalculate what the month	efore all ly wage v	payroll vould be.	2.	\$	4,405.27	\$	2,610.08	
3.	Estimate and list month	ly overt	ime pay.			3.	+\$	0.00	+\$	0.00	
4.	Calculate gross Income	. Add lir	ne 2 + line 3.			4.	\$	4,405.27	\$	2,610.08	

Schedule 1: Your Income page 1 Official Form 106I

4. Calculate gross Income. Add line 2 + line 3.

Keith A. Delancey Debtor 1 Case number (if known) Garin M. Delancey Debtor 2 For Debtor 2 or For Debtor 1 non-filing spouse 4,405.27 2.610.08 Copy line 4 here List all payroll deductions: Tax, Medicare, and Social Security deductions 1,234.83 675.89 5a. 5a \$ Mandatory contributions for retirement plans 5b. \$ 0.00 0.00 5b. Voluntary contributions for retirement plans 5c. \$ 0.00 \$ 0.00 5c. Required repayments of retirement fund loans \$ 5d. \$ 0.00 0.00 5d 5e. \$ 450.93 \$ 0.00 5ę. Insurance Domestic support obligations 5f. \$ 0.00 0.00 5f \$ 5g. Union dues 5g. \$ 0.00 0.00 5h.+ \$ \$ 196.30 0.00 5h. Other deductions. Specify: 401K loan 6. \$ \$ 675.89 6 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 1,882.06 \$ Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$ 2.523.21 1,934.19 7 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 0.00 8a. monthly net income. 8b. 0.00 0.00 8b. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce 8c 0.00 0.00 settlement, and property settlement. 8d. 0.00 0.00 8d. Unemployment compensation 8e. 0.00 0.00 **Social Security** 8e. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 0.00 0.00 Specify: 8g. 8g. Pension or retirement income 0.00 0.00 8h.+ 695.25 0.00 Other monthly income. Specify: IRS Refund Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 695.25 0.00 1,934.19 = \$ 10. \$ 3,218.46 + \$ 5,152.65 Calculate monthly income. Add line 7 + line 9. 10. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11 +\$ 0.00 Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 5.152.65 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

Official Form 1061 Schedule 1: Your Income page 2

	in this information to identify your case:					
				Check if this is:		
Debi	tor 1 Keith A. Delancey			An amend	ed filing	
Debt (Spc	tor 2 Garin M. Delancey buse, if filing)				ent showing po es as of the foll	stpetition chapter owing date:
Unite	ed States Bankruptcy Court for the: MIDDLE D	DISTRICT OF PENNSYL	VANIA	MM / DD /	YYYY	
	e number nown)					
Of	fficial Form 106J					
	chedule J: Your Expens	ses				12/15
Be	as complete and accurate as possible. If ormation. If more space is needed, attach nber (if known). Answer every question.	two married people are	e filing together, both are orm. On the top of any ad	equally respo Iditional pages	nsible for supp s, write your na	olying correct ame and case
Par 1.	t 1: Describe Your Household Is this a joint case?					
١.	□ No. Go to line 2.					
	Yes. Does Debtor 2 live in a separate	e household?				
	■ No					
	☐ Yes. Debtor 2 must file Official	Form 106J-2, Expenses	for Separate Household of	Debtor 2.		
2.	Do you have dependents? \square No					
	DO HOUR DODGE : SING	fill out this information for ach dependent	Dependent's relationship Debtor 1 or Debtor 2	age	liv	es dependent e with you?
	Do not state the dependents names.		Son	10 m	onths I	No Yes No
			Daughter	9	_	Yes
				· · · · · · · · · · · · · · · · · · ·	··	l No
			Daughter	14		Yes
						No
2	De versus sumanasa imaluda					Yes
3.	Do your expenses include expenses of people other than yourself and your dependents?	=				
Est	Estimate Your Ongoing Monthly timate your expenses as of your bankrup penses as of a date after the bankruptcy plicable date.	tcv filing date unless v	ou are using this form as lemental <i>Schedule J</i> , che	a supplement	in a Chapter 1 the top of the f	3 case to report orm and fill in the
the	clude expenses paid for with non-cash go e value of such assistance and have inclu fficial Form 106l.)	overnment assistance it uded it on <i>Schedule I:</i> Y	you know Your Income		Your expenses	
4.	The rental or home ownership expense payments and any rent for the ground or l	es for your residence. In ot.	nclude first mortgage	4. \$		1,081.21
	If not included in line 4:					
	4a. Real estate taxes			la. \$ _		0.00
	4b. Property, homeowner's, or renter's			lb \$		0.00
	4c. Home maintenance, repair, and up			1c. \$		100.00
5	4d. Homeowner's association or condo			ld. \$ 5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

Debto Debto	<u>-</u>	Case numl	ber (if known)	
6. L	Itilities:		•	
6	a. Electricity, heat, natural gas	6a.	\$	300.00
6	b. Water, sewer, garbage collection	6b.	\$	115.00
6	c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	225.00
6	d. Other. Specify:	6d.	\$	0.00
7. F	ood and housekeeping supplies	7.	\$	942.40
8. C	hildcare and children's education costs	8.	\$	180.00
9. C	Clothing, laundry, and dry cleaning	9.	\$	175.00
10. F	Personal care products and services	10.	\$	80.00
11. N	fedical and dental expenses	11.	\$	100.00
	ransportation. Include gas, maintenance, bus or train fare.	12.	\$	355.00
	o not include car payments.	13.	\$	
	ntertainment, clubs, recreation, newspapers, magazines, and books		·	125.00
	Charitable contributions and religious donations	14.	\$	40.00
15. J	nsurance.			
	o not include insurance deducted from your pay or included in lines 4 or 20. 5a. Life insurance	15a.	\$	0.00
	5b. Health insurance	15b.		0.00
		15c.	\$	189.00
	5c. Vehicle insurance	15d.	·	0.00
	5d. Other insurance. Specify:		Ψ	0.00
5	axes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:	16.	\$	0.00
	nstallment or lease payments: 7a. Car payments for Vehicle 1	17a.	\$	490.00
		17b.		0.00
	7b. Car payments for Vehicle 2	17b.	¢	0.00
	7c. Other Specify:	17d.	\$	
	7d. Other. Specify:	176.	Ψ	0.00
18. Y	our payments of alimony, maintenance, and support that you did not report as leducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
19.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
	Other real property expenses not included in lines 4 or 5 of this form or on Sche	dule I: Yo	our Income.	
2	Oa. Mortgages on other property	20a.		0.00
	Ob. Real estate taxes	20b.	\$	0.00
2	Oc. Property, homeowner's, or renter's insurance	20c.	\$	0.00
2	Od. Maintenance, repair, and upkeep expenses	20d.	\$	0.00
	Oe. Homeowner's association or condominium dues	20e.	\$	0.00
_	Other: Specify: Auto maintenance, repairs, inspections & registration	21.	+\$	35.00
	Diapers/baby supplies		+\$	75.00
	Misc. gifts/celebrations		+\$	35.00
- !	wisc. girts/celebrations		·	
22. (Calculate your monthly expenses			
2	22a. Add lines 4 through 21.		\$	4,642.61
2	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
2	22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,642.61
23. (Calculate your monthly net income.		-	
	3a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,152.65
	23b. Copy your monthly expenses from line 22c above.	23b.		4,642.61
•		- **		
2	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	510.04
	The result is your monthly net income.	200.		
F	Do you expect an increase or decrease in your expenses within the year after your expenses within the year after your expenses within the year or do you expect your nodification to the terms of your mortgage?	u file this mortgage	s form? payment to inc	rease or decrease because of a
	No.			
- 1	☐ Yes. Explain here:			

Fill in this inforr					
	mation to identify your ca	se:			
Debtor 1	Keith A. Delancey				
Dobtos 2	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Garin M. Delancey First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA		
Case number (if known)				-	k if this is an ded filing
Official Forr		ı Individua	l Debtor's Sch	edules	12/15
			onsible for supplying correc		
obtaining money	is form whenever you file y or property by fraud in 6 8 U.S.C. §§ 152, 1341, 15	connection with a bar	:s or amended schedules. M ıkruptcy case can result in fi	laking a false statement, concealir fines up to \$250,000, or imprisonm	ng property, or nent for up to 20
Sig	n Below				
Did you pa	ay or agree to pay someor	ne who is NOT an atto	orney to help you fill out ban	nkruptcy forms?	
Did you pa ■ No	ay or agree to pay someon	ne who is NOT an atto	orney to help you fill out ban	nkruptcy forms?	
■ No	ay or agree to pay someon	ne who is NOT an atto	orney to help you fill out ban	Attach Bankruptcy Petition F Declaration, and Signature (Preparer's Notice, Official Form 119)
■ No □ Yes.	Name of person		orney to help you fill out ban	Attach Bankruptcy Petition F Declaration, and Signature (Preparer's Notice, Official Form 119)
■ No □ Yes.	Name of person			Attach Bankruptcy Petition F Declaration, and Signature (Preparer's Notice, Official Form 119)
■ No □ Yes.	Name of person alty of perjury, I declare the		mmary and schedules filed v	Attach Bankruptcy Petition F Declaration, and Signature (with this declaration and	Preparer's Notice, Official Form 119)
■ No □ Yes. Under penathat they ar	Name of person alty of perjury, I declare the			Attach Bankruptcy Petition F Declaration, and Signature (with this declaration and ancey	Preparer's Notice, Official Form 119)

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Fill in	this inform	ation to identify your	case:			
Debto	r 1	Keith A. Delancey	/Middle Name	Last Name		
Debto	r 2	Garin M. Delance				
	e if, filing)	First Name	Middle Name	Last Name		
United	d States Bar	kruptcy Court for the:	MIDDLE DISTRICT OF PE	NNSYLVANIA		
Case (if know	number n)					neck if this is an mended filing
Stat Be as inform	complete a	of Financial A	attach a separate sheet to th	e filing together, both are	ankruptcy equally responsible for supp additional pages, write your	4/16 lying correct name and case
	·	n). Answer every ques		ived Pefere		
Part '			rital Status and Where You I	Livea Beiore		
1. V	Vhat is you	current marital status	s?			
	■ Married □ Not mar	ried				
2. C	ouring the la	ast 3 years, have you l	ived anywhere other than w	here you live now?		
	■ No □ Yes. Lis	t all of the places you li	ved in the last 3 years. Do not	t include where you live now		
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. V states	Vithin the la and territor	ast 8 years, did you ev es include Arizona, Cal	er live with a spouse or lega ifornia, Idaho, Louisiana, Nev	al equivalent in a commun ada, New Mexico, Puerto Ri	ity property state or territory co, Texas, Washington and W	? (Community property isconsin.)
	■ No □ Yes. Ma	ake sure you fill out <i>Sch</i>	edule H: Your Codebtors (Off	icial Form 106H).		
Part	2 Expla	n the Sources of You	r Income			
F	ill in the tota	al amount of income vol	nployment or from operating u received from all jobs and al have income that you receive	II businesses, including part-	ear or the two previous calent time activities. der Debtor 1.	dar years?
i	□ No					
	Yes. Fil	l in the details.				
			Debtor 1		Debtor 2	Canan income
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year untiled for bankruptcy:	■ Wages, commissions, bonuses, tips	\$24,584.00	■ Wages, commissions, bonuses, tips	\$13,791.41
			☐ Operating a business		☐ Operating a business	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	btor 1 btor 2		th A. Delar in M. Dela			Ca	ase number (if known)		
					Debtor 1		Debtor 2		
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco Check all that ap		Gross income (before deductions and exclusions)
Fo (Ja	r last o	calend 1 to I	lar year: December 3	1, 2016)	■ Wages, commissions, bonuses, tips	\$51,855.05	■ Wages, combonuses, tips	missions,	\$21,979.51
					☐ Operating a business		☐ Operating a	business	
Fo (J	or the c	alend 1 to I	lar year befo December 3	ore that: 1, 2015)	■ Wages, commissions, bonuses, tips	Unknowr	■ Wages, com bonuses, tips	missions,	Unknown
					☐ Operating a business		☐ Operating a	business	
	List €	No	ource and th		ome from each source separa	itely. Do not include incom	e that you listed in lir	ne 4.	
			Fill in the det	ails.	Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of inc	ome	Gross income
					Describe below.	each source (before deductions and exclusions)	Describe below	<i>.</i>	(before deductions and exclusions)
P	art 3:	List	Certain Pay	yments You	ı Made Before You Filed for	Bankruptcy			·
6.	Are □		Debtor 1's	or Debtor 2	2's debts primarily consume Debtor 2 has primarily cons a personal, family, or househo	er debts? umer debts. Consumer de	ebts are defined in 11	U.S.C. § 10	1(8) as "incurred by an
			During the	90 days bef Go to line	ore you filed for bankruptcy, o	lid you pay any creditor a t	total of \$6,425* or mo	ore?	
			□ Yes	paid that o	each creditor to whom you pa reditor. Do not include payme payments to an attorney for	ents for domestic support o this bankruptcy case.	bligations, such as c	niid support a	ind allmony. Also, do
			•	to adjustmei	nt on 4/01/19 and every 3 yea	rs after that for cases filed	on or after the date of	of adjustment	.
		Yes.	Debtor 1 of During the	or Debtor 2 90 days bet	or both have primarily constore you filed for bankruptcy, o	umer debts. did you pay any creditor a t	total of \$600 or more	?	
			No.	Go to line					t and the Danet
			□ _{Yes}	include pa	each creditor to whom you payments for domestic support or this bankruptcy case.	aid a total of \$600 or more obligations, such as child s	and the total amount support and alimony.	you paid tha Also, do not	it creditor. Do not include payments to ar
	Cre	editor	's Name and	d Address	Dates of paym	ent Total amount		Was this	payment for

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Official Form 107

	tor 1 tor 2	Keith A. Delancey Garin M. Delancey		Case	e number (if known)		
	Inside	n 1 year before you filed for bankruptcy ers include your relatives; any general part ich you are an officer, director, person in c iness you operate as a sole proprietor. 11 iny.	iners; relatives of any gener	ar partners, partne	securities: and ar	ny managing agent, including one for	s r
		No					
		Yes. List all payments to an insider.				Reason for this payment	
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
8.	Withi	in 1 year before you filed for bankruptc	y, did you make any paym	ents or transfer a	iny property on a	ccount of a debt that benefited an	ı
	insid						
		No					
		Yes. List all payments to an insider				December this navment	
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name	
Par	t 4:	Identify Legal Actions, Repossession	s, and Foreclosures				-
9.	List a	in 1 year before you filed for bankrupto all such matters, including personal injury of fications, and contract disputes.	y, were you a party in any cases, small claims actions	lawsuit, court ac divorces, collection	tion, or administi on suits, paternity a	rative proceeding? actions, support or custody	
		No					
		Yes. Fill in the details.					
		se title se number	Nature of the case	Court or agency		Status of the case	
	Ass Kei Del	deral National Mortage sociation ("Fannie Mae") vs. ith A. Delancey and Garin M.	Mortgage Foreclosure	Court of Comm Perry County Perry County C Center Square 25 West Main S	Courthouse	■ Pending □ On appeal □ Concluded	
	No.	. 2017-121		New Bloomfiel		Sheriff sale scheduled for October 27, 2017	
	— lar	ndisburg Municipal Authority vs.	Civil	Hon. Elizabeth	R.	☐ Pending	
	Kei	ith A. Delancey		Frownfelter		On appeal	
	MJ	-41305-CV-33-2017		MDJ-41-3-05 3553 Sherman	s Valley Road	☐ Concluded	
				PO Box 908 Loysville, PA		Judgment entered June 26, 2017	
	Lar	ndisburg Municipal Authority vs.	Municipal lien	Court of Comr	non Pleas of	☐ Pending	
	Kei	ith A. Delancey & Garin M.	•	Perry County	Courthouse	On appeal	
		lancey /-ML-2017-319		Perry County Center Square	•	Concluded	
				25 West Main New Bloomfie		municipal lien filed April 21 2017	,
10.	With Che	hin 1 year before you filed for bankrupt ck all that apply and fill in the details below	cy, was any of your prope	rty repossessed,	foreclosed, garni	shed, attached, seized, or levied?	,
		No. Go to line 11.					
		Yes. Fill in the information below.			- .	Malana of the	
	Cre	editor Name and Address	Describe the Property		Date	e Value of th propert	
			Explain what happened				
11.	Witl	hin 90 days before you filed for bankru	ptcy, did any creditor, incl	uding a bank or f	inancial institutio	n, set off any amounts from your	

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Best Case Bankruptcy

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Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Debtor 2		Case number	(if known)	
acc	ounts or refuse to make a payment	because you owed a debt?		
	No			
	Yes. Fill in the details.			
Cre	editor Name and Address	Describe the action the creditor took	Date action was taken	Amount
2. Witi	hin 1 year before you filed for bankr ırt-appointed receiver, a custodian,	ruptcy, was any of your property in the possession of an or another official?	assignee for the bene	fit of creditors, a
	No			
	Yes			
Part 5:	List Certain Gifts and Contribution	ons		
	him 2 years before you filed for han	kruptcy, did you give any gifts with a total value of more t	than \$600 per person?	•
i3. Wit	No	Riupicy, and you give any give man a votes results		
_	Yes. Fill in the details for each gift.			
	fts with a total value of more than \$	600 Describe the gifts	Dates you gave	Value
	r person	•	the gifts	
Ad	erson to Whom You Gave the Gift and Idress:			
14. Wit	thin 2 years before you filed for ban	kruptcy, did you give any gifts or contributions with a tot	al value of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or	r contribution.		
me Ch	fts or contributions to charities that ore than \$600 narity's Name ddress (Number, Street, City, State and ZIP C	t total Describe what you contributed	Dates you contributed	V alue
	List Certain Losses			
			41-1 h ef th ed	t fire other disaster
	thin 1 year before you filed for bank gambling?	ruptcy or since you filed for bankruptcy, did you lose any	ning because of thei	t, me, other disaster,
	No			
	Yes. Fill in the details.			
De	escribe the property you lost and	Describe any insurance coverage for the loss	Date of your	Value of property
ho	ow the loss occurred	Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	loss	lost
Part 7:	List Certain Payments or Transf			
16. W i	thin 1 year before you filed for bank	cruptcy, did you or anyone else acting on your behalf pay	or transfer any prope	rty to anyone you
co Inc	nsulted about seeking bankruptcy of clude any attorneys, bankruptcy petition	or preparing a bankruptcy petition? n preparers, or credit counseling agencies for services requir	ed in your bankruptcy.	
	No			
	Yes. Fill in the details.			
A E	erson Who Was Paid ddress mail or website address erson Who Made the Payment, if No	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
C 8:	redit Counseling Center 32 Second Street Pike Lichboro, PA 18954		July 7, 2017	\$39.00

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

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	otor 1 otor 2	Keith A. Delancey Garin M. Delancey			Case numbe	r (if known)	
17.	prom	n 1 year before you filed for bankruptc ised to help you deal with your credito It include any payment or transfer that you	rs or to make payments	se acting on yo s to your credit	our behalf pay ors?	or transfer any prope	rty to anyone who
		No					
		Yes. Fill in the details.				_	
	Pers Addı	on Who Was Paid ress	Description and very transferred	alue of any pro	operty	Date payment or transfer was made	Amount of payment
18.	trans	n 2 years before you filed for bankrupt ferred in the ordinary course of your bi le both outright transfers and transfers ma le gifts and transfers that you have alread	usiness or financial affa ade as security (such as	airs? the granting of a			, , ,
	_	No					
		Yes. Fill in the details.					
	Pers Addı	on Who Received Transfer ress	Description and very property transfer		payment	e any property or is received or debts xchange	Date transfer was made
	Pers	on's relationship to you					
19.	benef	n 10 years before you filed for bankrup ficiary? (These are often called asset-pro No Yes. Fill in the details.		y property to a	a self-settled t	rust or similar device	of which you are a
		e of trust	Description and v	alue of the pro	perty transfe	rred	Date Transfer was
			•	•			made
Par	t 8:	List of Certain Financial Accounts, Ins	struments, Safe Deposi	t Boxes, and S	torage Units		
20.	sold, Include house	n 1 year before you filed for bankrupto moved, or transferred? de checking, savings, money market, o es, pension funds, cooperatives, assoc	or other financial accou	nts; certificates	s of deposit; s		
		Yes. Fill in the details.					
		e of Financial Institution and ress (Number, Street, City, State and ZIP	Last 4 digits of account number	Type of acco instrument	c m	ate account was losed, sold, noved, or ransferred	Last balance before closing or transfer
21.		ou now have, or did you have within 1 y or other valuables?	year before you filed for	bankruptcy, a	ny safe depos	sit box or other depos	itory for securities,
		No					
		res. Fill in the details.					
		e of Financial Institution ress (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the	e contents	Do you still have it?
22.	Have	you stored property in a storage unit of	or place other than your	home within 1	year before	ou filed for bankrupt	cy?
	_	No					
		Yes. Fill in the details.			_		_
		e of Storage Facility ress (Number, Street, City, State and ZIP Code)	Who else has or l to it? Address (Number, S State and ZIP Code)		Describe the	e contents	Do you still have it?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Deb Deb		A. Delancey M. Delancey		Case number (if known)	
Part	9: Identify	Property You Hold or Cont	rol for Someone Else		
	Do you hold o for someone.	r control any property that	someone else owns? Include ar	ny property you borrowed from, ar	e storing for, or hold in trust
	■ No □ Yes. Fill	in the details.			
	Owner's Nam Address (Num	ne ber, Street, City, State and ZIP Code	Where is the property? (Number, Street, City, State and Code)		Value
Part	10: Give De	tails About Environmental	Information	<u> </u>	
For t	he purpose of	Part 10, the following defin	nitions apply:		
	toxic substand regulations co	ces, wastes, or material int ontrolling the cleanup of the	o the air, land, soil, surface wate ese substances, wastes, or mate		including statutes or
		ly location, facility, or prope te, or utilize it, including dis		nmental law, whether you now ow	n, operate, or utilize it or used
		aterial means anything an e Iterial, pollutant, contamina		azardous waste, hazardous subst	ance, toxic substance,
Repo	ort all notices,	releases, and proceedings	that you know about, regardles	s of when they occurred.	
24.	Has any gove	rnmental unit notified you t	hat you may be liable or potenti	ally liable under or in violation of a	n environmental law?
	■ No □ Yes. Fill i	n the details.			
	Name of site Address (Num	ber, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, C ZIP Code)	Environmental law, i ity, State and know it	f you Date of notice
25.	Have you noti	fied any governmental unit	of any release of hazardous ma	terial?	
	■ No □ Yes. Fill i	n the details.			
	Name of site Address (Num	ber, Street, City, State and ZIP Code	Governmental unit Address (Number, Street, C ZIP Code)	Environmental law, i ity, State and know it	f you Date of notice
26.	Have you bee	n a party in any judicial or a	administrative proceeding under	r any environmental law? Include s	settlements and orders.
	■ No □ Yes. Fill i	n the details.			
	Case Title Case Number	r	Court or agency Name Address (Number, Street, C State and ZIP Code)	Nature of the case ity,	Status of the case
Par	11: Give De	tails About Your Business	or Connections to Any Busines	s	
27.	Within 4 years	s before you filed for bankr	uptcy, did you own a business o	or have any of the following connec	ctions to any business?
	☐ A sole	proprietor or self-employe	ed in a trade, profession, or othe	r activity, either full-time or part-tir	me
	☐ A men	nber of a limited liability co	mpany (LLC) or limited liability p	partnership (LLP)	
	☐ A part	ner in a partnership			
	☐ An off	icer, director, or managing	executive of a corporation		
	☐ An ow	oner of at least 5% of the vo	ting or equity securities of a cor	poration	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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	tor 1 tor 2	Keith A. Delancey Garin M. Delancey	Cas	e number (if known)
		No. None of the above applies. Go to Pa		
	Add	iness Name ress ber, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
28.	Instit □ Nam Add	cutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement to an Date Issued	yone about your business? Include all financial
I havare to with 18 U	ve reatrue at a bar J.S.C. (C) ith A.	nd correct. I understand that making a f	Garin M. Delancey Signature of Debtor 2 Date	leclare under penalty of perjury that the answers of perjury that the answers of a property by fraud in connection rs, or both.
Did ■ N	10	ttach additional pages to Yo <i>ur Stateme</i>	nt of Financial Affairs for Individuals Filing	g for Bankruptcy (Official Form 107)?
	10		an attorney to help you fill out bankruptcy	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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United States Bankruptcy Court Middle District of Pennsylvania

In	Keith A. Delancey Garin M. Delancey		Case No.					
•••	Gaini M. Delancey	Debtor(s)	Chapter	13				
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEV FOR DI	(RTOR(S)				
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filin be rendered on behalf of the debtor(s) in contemplation of	(b), I certify that I am the attorn g of the petition in bankruptcy,	ney for the above nan or agreed to be paid	ned debtor(s) and that to me, for services rend	ered or to			
	For legal services, I have agreed to accept		 \$	4,000.00				
	Prior to the filing of this statement I have received		\$	0.00_				
	Balance Due		\$	4,000.00				
2.	The source of the compensation paid to me was:							
	■ Debtor □ Other (specify):							
3.	The source of compensation to be paid to me is:							
	■ Debtor □ Other (specify):							
4.	■ I have not agreed to share the above-disclosed comp	ensation with any other person	unless they are mem	bers and associates of m	ıy law firm.			
	☐ I have agreed to share the above-disclosed compensations of the agreement, together with a list of the name				firm. A			
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:							
	 a. Analysis of the debtor's financial situation, and rende b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credite d. [Other provisions as needed] Negotiations with secured creditors to rereaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hot 	ement of affairs and plan which ors and confirmation hearing, ar educe to market value; exe ns as needed; preparation	may be required; and any adjourned hea	rings thereof: preparation and fili	ng of			
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay a	ctions or			
		CERTIFICATION						
	I certify that the foregoing is a complete statement of any s bankruptcy proceeding. Date	Michael Johnston Signature of Attorne Johnston & Zagu 117 Main Street PO Box O Mifflin, PA 17058 717-436-8044 Fa jzmlawbecky@nr Name of law firm	16823 rskie, PC x: 717-436-2722	epresentation of the deb	tor(s) in			